## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

	orrespondence including below or directed other		a) specifying a new corre	spondence address;	and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for	
CURKEN) CORRESTONDENCE ADDRESS (Note: OSE DICCE ) for any stange of address				c(s) Transmittal. This ocrs. Each additional	certificate cannot be used	or domestic mailings of the for any other accompanying ent or formal drawing, must	
7	7590 02/17/	2009			ificate of Mailing or Trans	smission	
				ereby certify that this	Fee(s) Transmittal is bein	g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.	
,,			Г			(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	R	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
L	10/689,090 10/20/2003		Kevin S. Grant		1-2-27	3808	
TITLE OF INVENTION:	TRAFFIC MANAGEM		1			OATE DUI	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	J			
nonprovisional	NO	\$1510	\$300	<b>\$</b> 0	\$1810	05/18/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS	]			
RUSSELL, WANDA Z		2416	370-236000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.      ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			or agents OR, alternate (2) the name of a sing registered attorney or 2 registered patent att listed, no name will b	a single firm (having as a member a ey or agent) and the names of up to nt attorneys or agents. If no name is will be printed.			
DI EACC MOTE: Unla	ss an assignee is identi in 37 CFR 3.11. Comp NEE	ified below, no assigned below, no assigned bletion of this form is NO	patent. If an assigne		document has been filed for		
Please check the appropria	ate assignee category or	categories (will not be	printed on the patent) :	Individual 😡 Co	rporation or other private g	roup entity Government	
4a. The following fee(s) at Siles Fee Siles Publication Fee (No. ) Advance Order - #		permitted)	A check is enclosed. Payment by credit or	check is enclosed.  Syment by credit card. Form PTO-2038 is attached.  Director is hereby authorized to charge the required fee(s), any deficiency, or credit any erpayment, to Deposit Account Number 50-0762 (enclose an extra copy of this form).			
5. Change in Entity State	SMALL ENTITY state	us. See 37 CFR 1.27.			L ENTITY status. See 37 (		
NOTE: The Issue Fee and interest as shown by the re	Publication Fee (if requestres of the United Sta	uired) will not be accept tes Patept and Tradepta	red from anyone other than	the applicant; a regi	stered attorney or agent; or	the assignee or other party in	
Authorized Signature	Dougt	L/3.K	5-	DateA	pril 24, 2009	9	
Typed or printed name	<u> </u>	B. Ryan (			o. <u>37,922</u>		
					he public which is to file (a ninutes to complete, includ imments on the amount of Trademark Office, U.S. De S. SEND TO: Commissione displays a valid OMB contr	and by the USPTO to process) ling gathering, preparing, and time you require to complete epartment of Commerce, P.O. or for Patents, P.O. Box 1450.	